

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	✓		
O.I.P.E. CLASSIFIER	X.Y.		12-13-01
FORMALITY REVIEW	✓		
RESPONSE FORMALITY REVIEW	✓		

09/980,419

Best Available Copy

## INDEX OF CLAIMS

- ✓ ..... Rejected N ..... Non-elected
- = ..... Allowed I ..... Interference
- (Through numeral)... Canceled A ..... Appeal
- ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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